

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|--------------------------|--------------------|--------|----------|
| FEE DETERMINATION | MW | | 05-18-01 |
| O.I.P.E. CLASSIFIER | <i>[Signature]</i> | 49 | 8/9/01 |
| FORMALTY REVIEW | <i>[Signature]</i> | 1020 | 8/10/01 |
| RESPONSE FORMALTY REVIEW | NB 617 | 0617 | 10-01-01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

AT 03/11/01